United States Bankruptcy Court District of Idaho  Instructions: Complete this form and mail to: US Bankruptcy Court, 550 West Fort St. MSC 042, Boise, ID 83724	PROOF OF CLAIM Chapter (please check appropriate box): 7 [] 11 [] 12 [] 13 []  Proof of Claim Form and Supporting Documents are to be filed in DUPLICATE on Chapter 12 and 13 cases.	THIS SPACE FOR COURT USE ONLY  U. S. COURTS
In Re: (NAME OF DEBTOR)	CASE NUMBER: 96-3050	MAR 2 1 1997 €
NAME AND MAILING ADDRESS OF CREDITOR (The person or other entity to whom the debtor owes money or property):  Christa Mautino 2407 w. State *Lo Boise, Id 83702	NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 USC §503.	REC'D FILED CAMERON S. EUTHE CLERK
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR	Check here if this claim: [] REPLACES [] AMENDS a previously filed claim dated:	
1. BASIS FOR CLAIM: [] Goods Sold [] Services Performed [] Money Loaned [] Personal Injury/Wrongful Death [] Taxes [] Assignment [] Retirce Benefits as defined in 11 U.S.C. §1114(a)  Wages, salaries and compensation: Social Security #: 531-76-6147  Unpaid compensation for services performed from 11/18/96 to 11/25/96  DATE DATE		
2. DATE DEST OCCURRED: 12/9/96	3. IF COURT JUDGMENT, DATE OBTAINED:	
4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code, all claims are classified as one or more of the following:  a. Secured b. Unsecured Nonpriority c. Unsecured Priority  It is possible for part of a claim to be in one category and part in another. COMPLETE THE APPROPRIATE BOX (or boxes) that best describes your claim and STATE THE AMOUNT OF THE CLAIM AT THE TIME THE CASE WAS FILED.		
SECURED CLAIM: \$ Attach evidence of perfection of security interest Brief description of Collateral: [] Real Estate [] Motor Vehicle [] Other (Describe Briefly) Amount of Arrearage and other charges at time case was filed included in secured claim above, if any: \$	UNSECURED PRIORITY CLAIM: \$  SPECIFY THE PRIORITY OF THE CLAIM:  Wages, salaries, or commissions (up to \$4000, carned not bankrupucy petition or cessation of the debtor's business, while the contributions to an employee benefit plan - 11 USC § 500	ichever is earlier) 11 USC § 507(a)(3).
UNSECURED CLAIM: \$  A claim is unsecured if there is not collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.	[] Up to \$1800 of deposits toward purchase, lease, or remail family, or household use - 11 USC § 507(a)(6). [] Taxes or penalties of governmental units - 11 USC § 507(a) [] Other - Specify applicable paragraph of 11 USC § 507(a)	of property or services for personal,
5. TOTAL AMOUNT OF CLAIM AT THE TIME THE CASE WAS FILED:  UNSECURED: \$ SECURED: \$ PRIORITY: \$ TOTAL \$ 3 9.00  [] Check if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.		
<ol> <li>CREDITS AND OFFSETS: The amount of all payments on this claim has been credited and filing this claim, claimant has deducted all amounts that claimant owes to the debtor.</li> </ol>	deducted for the purpose of making this proof of claim. In	This Space For Court Use Only
7. SUPPORTING DOCUMENTS: ATTACH COPIES OF SUPPORTING DOCUMENTS, su assignments, deficiency documents, itemized statements of running accounts, contracts, court judgements available, explain. If the documents are voluminous, attach a summary.  DATE:  Sign and print the name and title, if any, of the claim (attach copy of power of attorney, if any)  Charles Manuary  Owners of power of attorney, if any)	creditor or other person authorized to file this	*31